

SERIAL 11041 S PRIVATE INVESTIGATOR SERVICES - OPDS

DATE OF LAST REVISION: October 30, 2014 CONTRACT END DATE: July 31, 2017

CONTRACT PERIOD THROUGH JULY 31, 2014 2017

TO: All Departments
FROM: Office of Procurement Services
SUBJECT: Contract for **PRIVATE INVESTIGATOR SERVICES - OPDS**

Attached to this letter is published an effective purchasing contract for products and/or services to be supplied to Maricopa County activities as awarded by Maricopa County on **August 03, 2011**.

All purchases of products and/or services listed on the attached pages of this letter are to be obtained from the vendor holding the contract. Individuals are responsible to the vendor for purchases made outside of contracts. The contract period is indicated above.

Wes Baysinger, Chief Procurement Officer
Office of Procurement Services

AS/at
Attach

Copy to: Office of Procurement Services
Merri Plummer, Office of Public Defense Services

(Please remove Serial 05059-S from your contract notebooks)

PRIVATE INVESTIGATOR SERVICES - OPDS

1.0 INTENT:

The intent of this contract is to establish a pool of qualified private investigators for the Maricopa County Office of Public Defense Services to assign to court proceedings in Maricopa County. Multiple contractor awards will be made.

Other governmental entities under agreement with the County may have access to services provided hereunder (see also Sections 2.3 and 2.4, below).

The County reserves the right to add additional contractors, at the County's sole discretion.

2.0 SCOPE OF SERVICES:

2.1 TECHNICAL REQUIREMENTS:

PREFACE:

The private investigator conducts investigations, reviews and assembles evidence, and provides recommendations for further development or investigation steps as warranted.

2.1.1 MINIMUM QUALIFICATIONS:

2.1.1.1 To qualify for an investigative contract with Maricopa County or to perform services pursuant to this contract, contractor must possess a valid Arizona State private investigator license in the name of the contractor or his/her own individual business name. It is not sufficient to be working as a private investigator using the license of another person. **A copy of the license must accompany your response.**

2.1.2 KNOWLEDGE, SKILLS AND ABILITIES:

2.1.2.1 Contractor must possess:

2.1.2.1.1 Knowledge of law enforcement and the justice system as it relates to indigent defense.

2.1.2.1.2 Ability to plan, organize, and effectively present ideas and concepts to others.

2.1.2.1.3 Ability to assimilate information from a variety of sources, analyze information and make or recommend a course of investigation.

2.1.2.1.4 Ability to communicate effectively, orally and in writing.

2.1.2.1.5 Ability to interact professionally and appropriately with clients, their families, attorneys and others.

2.1.2.1.6 The integrity and character to allow the investigator to effectively testify in court proceedings.

2.1.2.1.7 Understanding of client confidentiality and ethical conflicts.

2.1.3 INFORMATION RELATED TO PARTNERS AND ASSOCIATES:

2.1.3.1 Provide the following information for each partner or associate who may provide services pursuant to this contract. (A copy of attachment E must be provided for each.)

- 2.1.3.1.1 Name
- 2.1.3.1.2 Experience
- 2.1.3.1.3 References
- 2.1.3.1.4 Area of specialty, if any,

2.1.3.2 It is the duty of the Contractor to ensure OPDS has current information on every partner or associate.

2.1.3.3 Attach a copy of the valid Arizona State Private Investigator license for each associate.

2.1.4 DEFAULT, SUSPENSION AND TERMINATION:

2.1.4.1 The County may terminate the contract as follows:

2.1.4.1.1 No Cause: Upon thirty days written notice to contractor.

2.1.4.1.2 For Cause: Immediately upon written notice to contractor. "Cause" as used in this paragraph includes, but is not limited to:

- 2.1.4.1.2.1 contractor's failure to perform any obligation imposed by this contract;
- 2.1.4.1.2.2 contractor's failure to fulfill the reporting requirements of the contract;
- 2.1.4.1.2.3 contractor's failure to maintain a valid Arizona Private Investigator's license

Contractor may terminate this contract upon thirty (30) days written notice to the Contract Administrator. Contractor's termination of a contract(s) does not terminate contractor's duty to continue to provide services to those cases or persons assigned to contractor prior to the effective date of termination.

2.1.5 NON-EXCLUSIVE STATUS:

Maricopa County may provide or receive the same or similar professional services through persons or firms other than contractor, at the sole discretion of the County.

2.1.6 ASSIGNMENT OF CASES:

Contractor will be assigned to cases pursuant to this Contract as selected by the Contract Administrator. Contract does not guarantee any minimum assignment of cases or any minimum compensation.

The Contractor may be assigned to assist an individual who is representing himself or herself. In such a case, the Contractor will be directed by the self-represented client and not by an attorney. Contractor is nonetheless responsible for complying with all investigative requests of the individual unless such request involves a violation of statutes or court rules. In the event that the contractor believes that a request is legally inappropriate, the contractor should address that issue to the court.

In the event contractor becomes unable to complete an assignment and is allowed, by the Court, to withdraw from appointment, contractor shall immediately report the circumstances of the withdrawal to OPDS so that OPDS may appoint a replacement contractor. In the event the Court removes contractor from providing investigation services for any failure of performance, Contractor may, at the County's discretion be required to reimburse the County for any payment made to Contractor relating to the services and provide a written explanation of the failure of performance.

2.1.7 ACCEPT ASSIGNMENT:

Contractor shall accept all assignments made by the Contract Administrator unless Contractor is not ethically permitted to accept the assignment. If, after accepting an assignment, an ethical issue arises, contractor will notify assigned counsel of the conflict for appropriate action.

2.1.8 TERMINATION OF ASSIGNMENT:

Contractor's duties with regard to an assignment under this contract continue until the authorized hours are expended or the assignment is concluded, whichever occurs first. If the contractor exceeds the authorized hours, Maricopa County is under no obligation to award additional compensation

2.1.9 NO ADDITIONAL COMPENSATION:

Contractor may not solicit or accept private or additional compensation of any kind, including fees, costs or any other form of present or future compensation, in any matter that relates to or arises out of a current or pending assignment without prior approval from the Contract Administrator.

2.1.10 RECORDS AND REPORTS:

Contractor shall create and keep detailed and accurate time records of the services provided. Contractor will report, on a timely basis, data and statistics to the Contract Administrator in the manner prescribed by Maricopa County. Failure to submit time records in the time and manner specified by Maricopa County may result in withholding compensation until the contractor is in compliance and may also result in termination of the contract. Contractor shall make available for inspection and copying by the County all records and accounts relating to the work performed or the services provided under the Contract except any document that is privileged as an attorney-client communication. Contractor shall safeguard confidential and privileged information in accordance with all applicable laws, rules, standards and regulations.

2.1.11 COOPERATION:

Contractor shall assist the County in monitoring Contractor's performance of the Contract. Contractor shall cooperate with OPDS staff and shall carefully plan in order to perform duties under this contract timely and effectively. Contractor shall not commit or permit any act that will interfere with the performance of work by the Contract Administrator, any Contract Attorney or their staffs. Contractor shall notify OPDS if any non-contract investigator performs services on behalf of an OPDS client.

2.1.12 REQUESTS FOR EXPENDITURES:

In the event that the expenditure of funds is necessary for the performance of the duties required by the contract, the attorney of record should request authorization of those funds from the Contract Administrator. The Contractor shall not expend funds without prior written approval from Maricopa County.

OPDS will not reimburse Contractor for the cost of business overhead including: office supplies, secretarial or other staff services, transcripts of witness interviews. Additionally, OPDS will not reimburse the contractor for any other type of expense that involves the general cost of doing business including, but not limited to mailing expenses, costs for faxes, long-distance telephone calls, or the like unless approved in advance by the Contract Administrator as an extraordinary expense.

2.1.13 INTERPRETERS:

Interpreters from the Office of Court Interpreters will be used for non-English-speaking clients or witnesses as necessary for all court proceedings and out-of-court matters.

2.1.14 COURT ORDERS:

Any request made of any Court for an order directing any action or payment by Public Defense Services or Maricopa County must be served upon the Contract Administrator in compliance with the Rules of Civil Procedure regarding notice.

2.1.15 COMPLIANCE WITH LAW:

Contractor will comply with all laws, including rules and regulations of all governmental accreditation and regulatory authorities, including the State of Arizona, relating to the licensure and regulation of investigators. In the event that Contractor's license is suspended or revoked by the Arizona Department of Public Safety, Contractor must notify the Contract Administrator immediately. Failure to give such notice may result in termination of contract.

2.1.16 EQUIPMENT:

2.1.16.1 Contractor must possess the following:

2.1.16.1.1 Desktop or laptop computer

2.1.16.1.2 Microsoft Windows Word, Excel and Adobe Reader and other software as might be needed to allow contractor to conduct business electronically with OPDS

2.1.16.1.3 E-mail address

2.1.16.1.4 Pager and/or cell phone

2.1.17 MONTHLY CASE LOGS:

All OPDS logs must be completed and returned to Public Defense Services via e-mail on or before the designated date. Failure to submit these case logs by the designated date may result in the withholding of contractor's payment until such documentation is submitted and may result in the termination of the contract.

2.1.18 BILLING PERIOD:

All claims for payment must be made within six (6) months of the last service provided. (A.R.S. 11-622)

2.1.19 AVAILABILITY OF FUNDS:

Contractor and the County acknowledge that the continuation of any contract after the close of the County's fiscal year (on June 30 of each year) is contingent upon the approval of a County budget that identifies such contract as an authorized expenditure. The County does not represent that any budget item will be adopted. The approval of contract funding is the exclusive province of the County Board of Supervisors at the time of the adoption of the County's annual budget.

2.1.20 INDEPENDENT CONTRACTOR:

Contractor's relationship to the County shall be as an independent contractor and not as an employee. This contract does not constitute, create, give rise to or otherwise recognize a joint venture, partnership, agency or employment relationship. The rights and obligations of the Parties shall be only those expressly set forth in the contract. No

persons supplied by contractor in the performance of obligations under the contract are considered to be County employees, and no rights of County civil service, retirement or personnel rules attach for the benefit of such persons. Contractor shall have complete responsibility for all salaries, wages, bonuses, retirement withholdings, worker's compensation, other employee benefits and all taxes and premiums relating to such persons, and shall save and hold the County harmless with respect to those obligations in the event of a claim for one or more of them is brought against Maricopa County.

2.1.21 RIGHTS IN DATA:

The County shall have the use of data and reports resulting from the contract without cost or other restriction. The County shall have complete discretion to create or prepare reports or compilations of data relating to the contract. The data and reports or compilations of data are public records under Arizona law.

2.1.22 AMENDMENTS:

All amendments to the Contract shall be in writing and approved/signed by both parties. Maricopa County **Office of Procurement Services** shall be responsible for approving all amendments for Maricopa County.

2.1.23 STRICT COMPLIANCE:

Acceptance by Maricopa County of performance that is not in strict compliance with the terms of the Contract shall not be deemed to be a waiver of any term, including strict compliance with all other terms.

2.1.24 LAWS, RULES AND REGULATIONS:

Performance pursuant to the contract shall be accomplished in conformity with all applicable laws, ordinances, rules, regulations, and zoning restrictions.

2.1.25 NON-DISCRIMINATION AND EQUAL EMPLOYMENT OPPORTUNITY:

Contractor, in the performance of the contract, shall not discriminate against any person based on race, religion, sex, national origin, or disability.

2.1.26 ACCESS TO AND RETENTION OF RECORDS FOR THE PURPOSE OF AUDIT AND/OR OTHER REVIEW:

In accordance with section MCI 367 of the Maricopa County Procurement Code the Contractor agrees to retain all books, records, accounts, statements, reports, files, and other records and back-up documentation relevant to this Contract for six (6) years after final payment or until after the resolution of any audit questions which could be more than six (6) years, whichever is latest. The County, Federal or State auditors and any other persons duly authorized by the Department shall have full access to, and the right to examine, copy and make use of, any and all said materials. If the Contractor's books, records, accounts, statements, reports, files, and other records and back-up documentation relevant to this Contract are not sufficient to support and document that requested services were provided, the Contractor shall reimburse Maricopa County for the services not so adequately supported and documented.

If at any time it is determined by the County that a cost for which payment has been made is a disallowed cost, the County shall notify the Contractor in writing of the disallowance. The course of action to address the disallowance shall be at sole discretion of the County, and may include either an adjustment to future claim submitted by the Contractor by the amount of the disallowance, or to require

reimbursement forthwith of the disallowed amount by the Contractor by issuing a check payable to Maricopa County.

2.1.27 **PUBLIC RECORDS:**

All Offers submitted and opened are public records and must be retained by the Records Manager at the Office of Procurement Services. Offers shall be open to public inspection after Contract award and execution, except for such Offers deemed to be confidential by the Office of Procurement Services. If an Offeror believes that information in its Offer should remain confidential, it shall indicate as confidential, the specific information and submit a statement with its offer detailing the reasons that the information should not be disclosed. Such reasons shall include the specific harm or prejudice which may arise. The Records Manager of the Office of Procurement Services shall determine whether the identified information is confidential pursuant to the Maricopa County Procurement Code.

2.1.28 **AUDIT DISALLOWANCES:**

If at any time it is determined by the County that a cost for which payment has been made is a disallowed cost, the County shall notify the Contractor in writing of the disallowance and the required course of action, which shall be at the option of the County either to adjust any future claim submitted by the Contractor by the amount of the disallowance or to require repayment of the disallowed amount by the Contractor forthwith issuing a check payable to Maricopa County.

2.1.29 **DISPUTES:**

Except as otherwise provided by law, any dispute arising under the contract shall be processed according to the procedures identified in the Maricopa County Procurement Code, Section MC1-906.

2.1.30 **CLAIMS FOR PAYMENT:**

Contractor must submit an original *Invoice in Support of Request for Warrant* on the form prescribed by the County for payments. If OPDS disallows a portion of any claim, the claim shall be processed for the reduced amount.

2.1.31 **WAIVER OF CLAIMS:**

Contractor accepts the compensation provided in the Contract in lieu of any other claim, demand or request for payment or for additional compensation for the services that Contractor provides pursuant to the Contract.

2.1.32 **ALTERNATIVE DISPUTE RESOLUTION:**

2.1.32.1 After the exhaustion of the administrative remedies provided in the Maricopa County Procurement Code, any contract dispute in this matter is subject to compulsory arbitration. Provided the parties participate in the arbitration in good faith, such arbitration is not binding and the parties are entitled to pursue the matter in state or federal court sitting in Maricopa County for a de novo determination on the law and facts. If the parties cannot agree on an arbitrator, each party will designate an arbitrator and those two arbitrators will agree on a third arbitrator. The three arbitrators will then serve as a panel to consider the arbitration. The parties will be equally responsible for the compensation for the arbitrator(s). The hearing, evidence, and procedure will be in accordance with Rule 74 of the Arizona Rules of Civil Procedure. Within ten (10) days of the completion of the hearing the arbitrator(s) shall:

- 2.1.32.1.1 Render a decision;
- 2.1.32.1.2 Notify the parties that the exhibits are available for retrieval; and
- 2.1.32.1.3 Notify the parties of the decision in writing (a letter to the parties or their counsel shall suffice).

2.1.32.2 Within ten (10) days of the notice of decision, either party may submit to the arbitrator(s) a proposed form of award or other final disposition, including any form of award for attorneys' fees and costs. Within five (5) days of receipt of the foregoing, the opposing party may file objections. Within ten (10) days of receipt of any objections, the arbitrator(s) shall pass upon the objections and prepare a signed award or other final disposition and mail copies to all parties or their counsel.

2.1.32.3 Any party which has appeared and participated in good faith in the arbitration proceedings may appeal from the award or other final disposition by filing an action in the state or federal court sitting in Maricopa County within twenty (20) days after date of the award or other final disposition. Unless such action is dismissed for failure to prosecute, such action will make the award or other final disposition of the arbitrator(s) a nullity.

2.1.33 GOVERNING LAWS:

The Contract shall be governed and construed in accordance with the laws of the State of Arizona. Any action to enforce or interpret the Contract shall be litigated in the Maricopa County Superior Court only after the exhaustion of administrative remedies.

2.1.34 SECURITY AND PRIVACY:

The Contractor agrees that none of its officers or employees shall use or reveal any research or statistical information furnished by any person and identifiable to any specific private person for any purpose other than the purpose for which it was obtained. Copies of such information shall not, without the consent of the person furnishing such information, be admitted as evidence or used for any purpose in any action, suit, or other judicial or administrative proceedings, unless ordered by a court of competent jurisdiction. The County shall be notified immediately upon receipt of any such court order pertaining to the production of such information.

2.1.35 FURTHER ASSURANCES AND CORRECTIVE INSTRUMENTS:

The Parties will, from time to time, execute, acknowledge and deliver, or cause to be executed, acknowledged and delivered, any corrective instruments as may be reasonably necessary to carry out the intent of the Contract.

2.1.36 COMPLIANCE WITH APPLICABLE LAWS:

The Parties shall use reasonable efforts to comply with all applicable federal and state laws, rules and regulations.

2.1.37 NOTICE

2.1.37.1 All notices, demands and other communications to be given or delivered pursuant to the Contract shall be in writing and shall be deemed delivered upon the following:

2.1.37.1.1 Personal delivery;

2.1.37.1.1.1 One (1) business day from the confirmed transmission by e-mail or telecopier; or

2.1.37.1.1.2 Three (3) business days from deposit in the United States mail, registered or certified mail, return receipt requested, and postage prepaid to the Notice Address or to the last known address of the Party who is to be given notice.

2.1.38 RULES OF CONSTRUCTION:

All exhibits to the Contract are incorporated into the Contract as if set out verbatim. All prior and contemporaneous contracts, agreements, statements and understandings with respect to the subject matter of the Contract, if any, among the Parties, or their agents, are merged into the Contract, and the Contract shall constitute the entire agreement among the Parties.

2.1.39 RIGHTS CONFERRED ON OTHERS:

Any person who is entitled to indemnity by the terms of the Contract or by operation of law, is a third party beneficiary of the Contract to the extent only that such status is necessary to fulfill or enforce the indemnification.

2.1.40 SEVERABILITY:

Each provision of the Contract shall be construed to preserve its validity and enforceability to the extent possible. If any provision of the Contract is declared void, invalid or unenforceable, the Party who would have enforced the provision may elect whether the provision shall be modified to the extent necessary to make it valid and enforceable or excluded from the Contract.

2.1.41 VALIDITY:

The invalidity, in whole or in part, of any provision of the Contract shall not void or affect the validity of any other provision of the Contract.

2.1.42 REMEDIES CUMULATIVE:

Any remedy in the Contract is cumulative and is not exclusive of any other remedy nor does it limit any other legal or equitable remedy that may be available to any Party.

2.1.43 TRAVEL:

All travel for contractors, witnesses or experts must be pre-approved and scheduled through Public Defense Services. Arrangements for rental cars and hotels shall also be made through Public Defense services.

2.1.44 CHANGE OF ADDRESS OR FIRM MEMBERS:

Contractor shall promptly notify the **Office of Procurement Services** and Public Defense Services in writing of any changes to telephone numbers, e-mail addresses, business addresses, business name and members of the firm who will be performing services pursuant to this contract.

2.1.45 COMPENSATION:

2.1.45.1 METHOD OF PAYMENT:

Public Defense Services will compensate contractor on an hourly basis for work approved to be performed. The contractor will present an invoice for each case with a detailed statement of the amount of time spent performing each task. That invoice shall be approved by the attorney for whom the investigator is working. No such approval is necessary if the contractor is assigned to a person

representing himself or herself. Public Defense Services may, at its discretion, establish other policies to be followed or submitting claims.

2.1.45.2 LIMITED SCOPE OF CONTRACTOR'S DUTIES:

2.1.45.2.1 Absent permission of the Contract Administrator, OPDS will not compensate contractor to:

- 2.1.45.2.1.1 Conduct interviews arranged by the prosecution including, but not limited to, those cases in which the defendant acts as his/her own lawyer;
- 2.1.45.2.1.2 Conduct interviews arranged by the defense including, but not limited to, those cases in which the defendant acts as his/her own lawyer;
- 2.1.45.2.1.3 Attend or participate in Jury Selection;
- 2.1.45.2.1.4 Attend or participate in trials unless it is for the time spent testifying as a witness; and
- 2.1.45.2.1.5 Attend or participate in pretrial conferences or hearings unless called as a witness.

2.1.45.3 PAYMENT:

2.1.45.3.1 The contractor shall be paid at the following rates:

- 2.1.45.3.1.1 Meeting with client for review of discovery - \$25.00/hr.
- 2.1.45.3.1.2 All other authorized tasks - \$35.00/hr.

2.1.45.4 Problems regarding billing or invoicing shall be directed to the using agency as listed on the Purchase Order.

2.1.45.5 Payment shall be made to the Contractor by Accounts Payable through the Maricopa County Vendor Express Payment Program. This is an Electronic Funds Transfer (EFT) process. After Contract Award the Contractor shall complete the Vendor Registration Form located on the County Department of Finance Vendor Registration Web Site (www.maricopa.gov/finance/vendors).

2.1.45.6 EFT payments to the routing and account numbers designated by the Contractor will include the details on the specific invoices that the payment covers. The Contractor is required to discuss remittance delivery capabilities with their designated financial institution for access to those details.

2.2 TAX:

No tax shall be levied against labor. It is the responsibility of the Contractor to determine any and all taxes and include the same in proposal price.

2.3 STRATEGIC ALLIANCE for VOLUME EXPENDITURES (\$AVE):

The County is a member of the \$AVE cooperative purchasing group. \$AVE includes the State of Arizona, many Phoenix metropolitan area municipalities, and many K-12 unified school districts. Under the \$AVE Cooperative Purchasing Agreement, and with the concurrence of the successful Respondent under this solicitation, a member of \$AVE may access a contract resulting from a solicitation issued by the County. If you **do not** want to grant such access to a member of \$AVE, **please so state** in your proposal. In the absence of a statement to the contrary, the County will assume that you do wish to grant access to any contract that may result from this Request for Proposal.

2.4 INTERGOVERNMENTAL COOPERATIVE PURCHASING AGREEMENTS (ICPA's)

County currently holds ICPA's with numerous governmental entities throughout the State of Arizona. These agreements allow those entities, with the approval of the Contractor, to purchase their requirements under the terms and conditions of the County Contract. Please indicate on Attachment A, your acceptance or rejection regarding such participation of other governmental entities. Your response will not be considered as an evaluation factor in awarding a contract.

3.0 CONTRACTUAL TERMS & CONDITIONS:

3.1 CONTRACT TERM:

This Invitation for Bid is for awarding a firm, fixed price purchasing contract to cover a three (3) year term.

3.2 OPTION TO RENEW:

The County may, at their option and with the approval of the Contractor, renew the term of this Contract up to a maximum of three (3) additional years, (or at the County's sole discretion, extend the contract on a month to month basis for a maximum of six (6) months after expiration). The Contractor shall be notified in writing by the **Office of Procurement Services** of the County's intention to renew the contract term at least thirty (30) calendar days prior to the expiration of the original contract term.

3.3 INDEMNIFICATION:

3.3.1 To the fullest extent permitted by law, Contractor shall defend, indemnify, and hold harmless County, its agents, representatives, officers, directors, officials, and employees from and against all claims, damages, losses and expenses, including, but not limited to, attorney fees, court costs, expert witness fees, and the cost of appellate proceedings, relating to, arising out of, or alleged to have resulted from the negligent acts, errors, omissions, mistakes or malfeasance relating to the performance of this Contract. Contractor's duty to defend, indemnify and hold harmless County, its agents, representatives, officers, directors, officials, and employees shall arise in connection with any claim, damage, loss or expense that is caused by any negligent acts, errors, omissions or mistakes in the performance of this Contract by the Contractor, as well as any person or entity for whose acts, errors, omissions, mistakes or malfeasance Contractor may be legally liable.

3.3.2 The amount and type of insurance coverage requirements set forth herein will in no way be construed as limiting the scope of the indemnity in this paragraph.

3.3.3 The scope of this indemnification does not extend to the sole negligence of County.

3.4 INSURANCE:

3.4.1 **Contractor, at Contractor's own expense, shall purchase and maintain the herein stipulated minimum insurance from a company or companies duly licensed by the State of Arizona and possessing a current A.M. Best, Inc. rating of B++. In lieu of State of Arizona licensing, the stipulated insurance may be purchased from a company or companies, which are authorized to do business in the State of Arizona, provided that said insurance companies meet the approval of County. The form of any insurance policies and forms must be acceptable to County.**

3.4.2 All insurance required herein shall be maintained in full force and effect until all work or service required to be performed under the terms of the Contract is satisfactorily completed and formally accepted. Failure to do so may, at the sole discretion of County, constitute a material breach of this Contract.

- 3.4.3 Contractor's insurance shall be primary insurance as respects County, and any insurance or self-insurance maintained by County shall not contribute to it.
- 3.4.4 Any failure to comply with the claim reporting provisions of the insurance policies or any breach of an insurance policy warranty shall not affect the County's right to coverage afforded under the insurance policies.
- 3.4.5 The insurance policies may provide coverage that contains deductibles or self-insured retentions. Such deductible and/or self-insured retentions shall not be applicable with respect to the coverage provided to County under such policies. Contractor shall be solely responsible for the deductible and/or self-insured retention and County, at its option, may require Contractor to secure payment of such deductibles or self-insured retentions by a surety bond or an irrevocable and unconditional letter of credit.
- 3.4.6 County reserves the right to request and to receive, within 10 working days, certified copies of any or all of the herein required insurance certificates. County shall not be obligated to review policies and/or endorsements or to advise Contractor of any deficiencies in such policies and endorsements, and such receipt shall not relieve Contractor from, or be deemed a waiver of County's right to insist on strict fulfillment of Contractor's obligations under this Contract.
- 3.4.7 The insurance policies required by this Contract, except Workers' Compensation, shall name County, its agents, representatives, officers, directors, officials and employees as Additional Insureds.
- 3.4.8 The policies required hereunder, shall contain a waiver of transfer of rights of recovery (subrogation) against County, its agents, representatives, officers, directors, officials and employees for any claims arising out of Contractor's work or service.
- 3.4.9 Commercial General Liability:
- Commercial General Liability insurance and, if necessary, Commercial Umbrella insurance with a limit of not less than \$1,000,000 for each occurrence, \$2,000,000 Products/Completed Operations Aggregate, and \$2,000,000 General Aggregate Limit. The policy shall include coverage for bodily injury, broad form property damage, personal injury, products and completed operations and blanket contractual coverage, and shall not contain any provision which would serve to limit third party action over claims.
- 3.4.10 Automobile Liability:
- Commercial/Business Automobile Liability insurance and, if necessary, Commercial Umbrella insurance with a combined single limit for bodily injury and property damage of not less than \$1,000,000 each occurrence with respect to any of the Contractor's owned, hired, and non-owned vehicles assigned to or used in performance of the Contractor's work or services under this Contract.
- 3.4.11 Workers' Compensation:
- 3.4.11.1 Workers' Compensation insurance to cover obligations imposed by federal and state statutes having jurisdiction of Contractor's employees engaged in the performance of the work or services under this Contract; and Employer's Liability insurance of not less than \$1,000,000 for each accident, \$1,000,000 disease for each employee, and \$1,000,000 disease policy limit.
(N.B. - \$1,000,000 limits on larger contracts)
- 3.4.11.2 Contractor waives all rights against County and its agents, officers, directors and employees for recovery of damages to the extent these damages are covered by the Workers' Compensation and Employer's Liability or

commercial umbrella liability insurance obtained by Contractor pursuant to this Contract.

3.4.12 Errors and Omissions Insurance.

Errors and Omissions insurance and, if necessary, Commercial Umbrella insurance, which will insure and provide coverage for errors or omissions of the Contractor, with limits of no less than \$1,000,000 for each claim.

3.4.13 Certificates of Insurance.

3.4.13.1 Prior to commencing work or services under this Contract, Contractor shall have insurance in effect as required by the Contract in the form provided by the County, issued by Contractor's insurer(s), as evidence that policies providing the required coverage, conditions and limits required by this Contract are in full force and effect. Such certificates shall be made available to the County upon 48 hours' notice. **BY SIGNING THE AGREEMENT PAGE THE CONTRACTOR AGREES TO THIS REQUIREMENT AND FAILURE TO MEET THIS REQUIREMENT WILL RESULT IN CANCELLATION OF CONTRACT.**

3.4.13.1.1 In the event any insurance policy (ies) required by this contract is (are) written on a "claims made" basis, coverage shall extend for two years past completion and acceptance of Contractor's work or services and as evidenced by annual Certificates of Insurance.

3.4.13.1.2 If a policy does expire during the life of the Contract, a renewal certificate must be sent to County fifteen (15) days prior to the expiration date.

3.4.14 Cancellation and Expiration Notice.

Insurance required herein shall not be permitted to expire, be canceled, or materially changed without thirty (30) days prior written notice to the County.

3.5 PROCUREMENT CARD ORDERING CAPABILITY:

County may determine to use a procurement card that may be used from time-to-time, to place and make payment for orders under this Contract. Contractors without this capability may be considered non-responsive and not eligible for award consideration.

3.6 INTERNET ORDERING CAPABILITY:

It is the intent of County to use the Internet to communicate and to place orders under this Contract. Contractors without this capability may be considered non-responsive and not eligible for award consideration.

3.7 LANGUAGE FOR REQUIREMENTS CONTRACTS:

Contractors signify their understanding and agreement by signing a bid submittal, that the Contract resulting from the bid will be a requirements contract. However, the Contract does not guarantee any purchases will be made. It only indicates that if purchases are made for the materials contained in the Contract, they will be purchased from the Contractor awarded that item. Orders will only be placed when the County identifies a need and proper authorization and documentation have been approved.

County reserves the right to cancel Purchase Orders within a reasonable period of time after issuance. Should a Purchase Order be canceled, the County agrees to reimburse the Contractor but only for actual and documentable costs incurred by the Contractor due to

and after issuance of the Purchase Order. The County will not reimburse the Contractor for any costs incurred after receipt of County notice of cancellation, or for lost profits, shipment of product prior to issuance of Purchase Order, etc.

Contractors agree to accept verbal notification of cancellation from the County Procurement Officer with written notification to follow. By submitting a bid in response to this Invitation for Bids, the Contractor specifically acknowledges to be bound by this cancellation policy.

3.8 UNCONDITIONAL TERMINATION FOR CONVENIENCE:

Maricopa County may terminate the resultant Contract for convenience by providing sixty (60) calendar days advance notice to the Contractor.

3.9 TERMINATION FOR DEFAULT:

If the Contractor fails to meet deadlines, or fails to provide the agreed upon service/material altogether, a termination for default will be issued. The termination for default will be issued only after the County deems that the Contractor has failed to remedy the problem after being forewarned.

3.10 TERMINATION BY THE COUNTY:

If the Contractor should be adjudged bankrupt or should make a general assignment for the benefit of its creditors, or if a receiver should be appointed on account of its insolvency, the County may terminate the Contract. If the Contractor should persistently or repeatedly refuse or should fail, except in cases for which extension of time is provided, to provide enough properly skilled workers or proper materials, or persistently disregard laws and ordinances, or not proceed with work or otherwise be guilty of a substantial violation of any provision of this Contract, then the County may terminate the Contract. Prior to termination of the Contract, the County shall give the Contractor fifteen- (15) calendar day's written notice. Upon receipt of such termination notice, the Contractor shall be allowed fifteen (15) calendar days to cure such deficiencies.

3.11 STATUTORY RIGHT OF CANCELLATION FOR CONFLICT OF INTEREST:

Notice is given that pursuant to A.R.S. § 38-511 the County may cancel any Contract without penalty or further obligation within three years after execution of the contract, if any person significantly involved in initiating, negotiating, securing, drafting or creating the contract on behalf of the County is at any time while the Contract or any extension of the Contract is in effect, an employee or agent of any other party to the Contract in any capacity or consultant to any other party of the Contract with respect to the subject matter of the Contract. Additionally, pursuant to A.R.S § 38-511 the County may recoup any fee or commission paid or due to any person significantly involved in initiating, negotiating, securing, drafting or creating the contract on behalf of the County from any other party to the contract arising as the result of the Contract.

3.12 OFFSET FOR DAMAGES;

In addition to all other remedies at Law or Equity, the County may offset from any money due to the Contractor any amounts Contractor owes to the County for damages resulting from breach or deficiencies in performance of the contract.

3.13 ADDITIONS/DELETIONS OF SERVICE:

3.13.1 The County reserves the right to add and/or delete materials to a Contract. If a service requirement is deleted, payment to the Contractor will be reduced proportionately, to the amount of service reduced in accordance with the bid price. If additional materials are required from a Contract, prices for such additions will be negotiated between the Contractor and the County.

- 3.13.2 **The County reserves the right of final approval on proposed staff for all Task Orders. Also, upon request by the County, the Contractor will be required to remove any employees working on County projects and substitute personnel based on the discretion of the County within two business days, unless previously approved by the County.**

3.14 SUBCONTRACTING:

- 3.14.1 The Contractor may not assign a Contract or Subcontract to another party for performance of the terms and conditions hereof without the written consent of the County. All correspondence authorizing subcontracting must reference the Bid Serial Number and identify the job project.
- 3.14.2 The Subcontractor's fee for services rendered shall not exceed that of the Contractor's rate, in the pricing section, unless the Contractor is willing to absorb any higher rates. The Subcontractor's invoice shall be invoiced directly to the Contractor, who in turn shall pass-through the costs to the County, without mark-up. A copy of the Subcontractor's invoice must accompany the Prime Contractor's invoice.

3.15 CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

- 3.15.1 The undersigned (authorized official signing for the Contractor) certifies to the best of his or her knowledge and belief, that the Contractor, defined as the primary participant in accordance with 45 CFR Part 76, and its principals:
- 3.15.1.1 are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;
- 3.15.1.2 have not within 3-year period preceding this Contract been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- 3.15.1.3 are not presently indicted or otherwise criminally or civilly charged by a government entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (2) of this certification; and
- 3.15.1.4 have not within a 3-year period preceding this Contract had one or more public transaction (Federal, State or local) terminated for cause of default.
- 3.15.2 Should the Contractor not be able to provide this certification, an explanation as to why should be attached to the Contract.
- 3.15.3 The Contractor agrees to include, without modification, this clause in all lower tier covered transactions (i.e. transactions with subcontractors) and in all solicitations for lower tier covered transactions related to this Contract.

3.16 VERIFICATION REGARDING COMPLIANCE WITH ARIZONA REVISED STATUTES §41-4401 AND FEDERAL IMMIGRATION LAWS AND REGULATIONS:

- 3.16.1 By entering into the Contract, the Contractor warrants compliance with the Immigration and Nationality Act (INA using e-verify) and all other federal immigration laws and regulations related to the immigration status of its employees and A.R.S. §23-214(A). The contractor shall obtain statements from its subcontractors certifying compliance and shall furnish the statements to the Procurement Officer upon request. These warranties shall

remain in effect through the term of the Contract. The Contractor and its subcontractors shall also maintain Employment Eligibility Verification forms (I-9) as required by the Immigration Reform and Control Act of 1986, as amended from time to time, for all employees performing work under the Contract and verify employee compliance using the E-verify system and shall keep a record of the verification for the duration of the employee's employment or at least three years, whichever is longer. I-9 forms are available for download at USCIS.GOV.

- 3.16.2 The County retains the legal right to inspect contractor and subcontractor employee documents performing work under this Contract to verify compliance with paragraph 3.13.1 of this Section. Contractor and subcontractor shall be given reasonable notice of the County's intent to inspect and shall make the documents available at the time and date specified. Should the County suspect or find that the Contractor or any of its subcontractors are not in compliance, the County will consider this a material breach of the contract and may pursue any and all remedies allowed by law, including, but not limited to: suspension of work, termination of the Contract for default, and suspension and/or debarment of the Contractor. All costs necessary to verify compliance are the responsibility of the Contractor.

~~3.17 VERIFICATION REGARDING COMPLIANCE WITH ARIZONA REVISED STATUTES §§35-391.06 AND 35-393.06 BUSINESS RELATIONS WITH SUDAN AND IRAN:~~

~~3.17.1 By entering into the Contract, the Contractor certifies it does not have scrutinized business operations in Sudan or Iran. The contractor shall obtain statements from its subcontractors certifying compliance and shall furnish the statements to the Procurement Officer upon request. These warranties shall remain in effect through the term of the Contract.~~

~~3.17.2 The County may request verification of compliance for any contractor or subcontractor performing work under the Contract. Should the County suspect or find that the Contractor or any of its subcontractors are not in compliance, the County may pursue any and all remedies allowed by law, including, but not limited to: suspension of work, termination of the Contract for default, and suspension and/or debarment of the Contractor. All costs necessary to verify compliance are the responsibility of the Contractor.~~

3.18 CONTRACTOR LICENSE REQUIREMENT:

The Respondent shall procure all permits, insurance, licenses and pay the charges and fees necessary and incidental to the lawful conduct of his/her business, and as necessary complete any required certification requirements, required by any and all governmental or non-governmental entities as mandated to maintain compliance with and in good standing for all permits and/or licenses. The Respondent shall keep fully informed of existing and future trade or industry requirements, Federal, State and Local laws, ordinances, and regulations which in any manner affect the fulfillment of a Contract and shall comply with the same. Contractor shall immediately notify both Office of Procurement Services and the using agency of any and all changes concerning permits, insurance or licenses.

Respondents furnishing finished products, materials or articles of merchandise that will require installation or attachment as part of the Contract, shall possess any licenses required. A Respondent is not relieved of its obligation to possess the required licenses by subcontracting of the labor portion of the Contract. Respondents are advised to contact the Arizona Registrar of Contractors, Chief of Licensing, at (602) 542-1525 to ascertain licensing requirements for a particular contract. Respondents shall identify which license(s), if any, the Registrar of Contractors requires for performance of the Contract.

3.19 INFLUENCE

As prescribed in MC1-1202 of the Maricopa County Procurement Code, any effort to influence an employee or agent to breach the Maricopa County Ethical Code of Conduct or any ethical conduct, may be grounds for Disbarment or Suspension under MC1-902.

An attempt to influence includes, but is not limited to:

3.19.1 **A Person offering or providing a gratuity, gift, tip, present, donation, money, entertainment or educational passes or tickets, or any type valuable contribution or subsidy,**

3.19.2 **That is offered or given with the intent to influence a decision, obtain a contract, garner favorable treatment, or gain favorable consideration of any kind.**

If a Person attempts to influence any employee or agent of Maricopa County, the Chief Procurement Officer, or his designee, reserves the right to seek any remedy provided by the Maricopa County Procurement Code, any remedy in equity or in the law, or any remedy provided by this contract.

3.20 POST AWARD MEETING:

The Contractor may be required to attend a post-award meeting with the Using Agency to discuss the terms and conditions of this Contract. This meeting will be coordinated by the Procurement Officer of the Contract.

ARIZONA INVESTIGATIVE ASSOCIATES, 4365 E PECOS ROAD SUITE 130, GILBERT, AZ 85295

RESPONDENT NAME: **Arizona Investigative Associates, PLLC**
 ADDRESS: **4365 E Pecos Rd. Suite 130 Gilbert, AZ 85295**
 P.O. ADDRESS: **4365 E Pecos Rd. Suite 130 Gilbert, AZ 85295**
 TELEPHONE NUMBER: **602-252-2474**
 FACSIMILE NUMBER: **602-235-0530**
 WEB SITE: **www.AZPrivateInvestigator.com**
 REPRESENTATIVE: **Justin Yentes**
 REPRESENTATIVE E-MAIL: **Justin@AZPrivateInvestigator.com**

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES _____ % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES	
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES	
Are you bilingual; fluent in English & another language other than English?	YES	Spanish

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000889 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

BAKOS INVESTIGATIVE SERVICES, P.O. BOX 2142, SUN CITY, AZ 85372-2142

RESPONDENT NAME: **Bakos Investigative Services**
 ADDRESS: **27600 No. 86th Ave. Peoria, Ariz. 85383**
 P.O. ADDRESS: **P.O. Box 2142 Sun City, Ariz. 85372-2142**
 TELEPHONE NUMBER: **602-319-7707**
 FACSIMILE NUMBER: **6232439930**
 WEB SITE: **(None)**
 REPRESENTATIVE: **Steven D. Bakos**
 REPRESENTATIVE E-MAIL: **bis1100@cox.net**

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000904 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

BOND INVESTIGATIONS, INC. 2601 NORTH 16TH STREET PHOENIX, AZ 85006
P.O. BOX 1431, QUEEN CREEK, AZ 85242

RESPONDENT NAME: **Bond Investigations Inc**
~~37859 North Luke Lane Queen Creek, AZ 85140~~
 ADDRESS: **2601 N. 16th Street Phoenix, AZ 85006**
 P.O. ADDRESS: ~~PO Box 1487 Queen Creek, AZ 85242~~
 TELEPHONE NUMBER: **(480)539-0586**
 FACSIMILE NUMBER: **(480)539-0650**
 WEB SITE: **www.bondinvestigations.com**
 REPRESENTATIVE: **Dorian Bond**
 REPRESENTATIVE E-MAIL: **dorian@bondinvestigations.com**

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	% 0

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES	
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES	
Are you bilingual; fluent in English & another language other than English?	YES	Spanish

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000915 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

DESAYE PLLC, 8618 N CARDINAL DR, PHOENIX, AZ 85028

4233 E CALLE TUBERA, PHOENIX, AZ 85018

RESPONDENT NAME: **DeSaye PLLC**
8618 N Cardinal Dr, Phoenix, AZ 85028
 ADDRESS: **4233 E Calle Tuberia Phoenix, AZ 85018**
 P.O. ADDRESS:
 TELEPHONE NUMBER: **(602) 373-2071**
 FACSIMILE NUMBER: **(866) 931-5434**
 WEB SITE: **NA**
 REPRESENTATIVE: **Robin Rennee DeSaye**
 REPRESENTATIVE E-MAIL: **Rennée@DeSaye.com**

YES	NO	REBATE
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WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:

<input type="checkbox"/>	<input checked="" type="checkbox"/>	%
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(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES	
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES	
Are you bilingual; fluent in English & another language other than English?	YES	Spanish Italian

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000509 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

DICARLO ASSOCIATES LLC, 20280 N 59TH AVE, SUITE 115-631, GLENDALE, AZ 85308

RESPONDENT NAME: **DiCarlo Associates LLC; License #1003885**
 ADDRESS: **20280 N 59th Ave #115-631 Glendale, AZ 85308**
 P.O. ADDRESS:
 TELEPHONE NUMBER: **623-476-5567**
 FACSIMILE NUMBER: **623-321-6058**
 WEB SITE: **www.dicarloassociates.com**
 REPRESENTATIVE: **Van DiCarlo**
 REPRESENTATIVE E-MAIL: **van.dicarlo@dicarloassociates.com**

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	% 1.0

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES **0%** % OF TOTAL BID AMOUNT. (If Applicable)

☐ NET 30 DAYS ☒ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000891 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

FRAAS INVESTIGATIVE SERVICES, PO BOX 93937, PHOENIX, AZ 85070

RESPONDENT NAME: **Charles Fraas**
 ADDRESS: **16005 S. 27th Dr. Phoenix, AZ 85045**
 P.O. ADDRESS: **N/A**
 TELEPHONE NUMBER: **602-881-6951**
 FACSIMILE NUMBER: **1-866-405-2812**
 WEB SITE: **N/A**
 REPRESENTATIVE: **Charles Fraas**
 REPRESENTATIVE E-MAIL: **chuckfraas@aol.com**

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000449 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

GILBERT NUNEZ INVESTIGATIONS, 3370 N. HAYDEN RD. STE123, PMB#212, SCOTTSDALE, AZ 85251

RESPONDENT NAME: **Gilberto Nunez Investigations**
 ADDRESS: **3370 N. Hayden Rd. Ste 123,PMB #212**
 P.O. ADDRESS: **Scottsdale, Arizona 85251**
 TELEPHONE NUMBER: **480-227-4997**
 FACSIMILE NUMBER:
 WEB SITE:
 REPRESENTATIVE: **Gilberto Nunez**
 REPRESENTATIVE E-MAIL: **gilbrtnz@aol.com**

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	YES

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000900 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

HANRATTY INVESTIGATIONS, P.O. BOX 20908, MESA, AZ 85277
866, SCOTTSDALE, AZ 85252

RESPONDENT NAME: **A. Charles Hanratty Investigation & Polygraph Services**
 ADDRESS: **1232 East Broadway Rd., Suite 201 Tempe, AZ 85282**
 P.O. ADDRESS: **N/A**
 TELEPHONE NUMBER: **(480) 784-6000**
 FACSIMILE NUMBER: **(480) 784-6001**
 WEB SITE: **n/a**
 REPRESENTATIVE: **Arthur C. Hanratty**
 REPRESENTATIVE E-MAIL: **ahanratty@msn.com**

YES	NO	REBATE
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WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:

<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:

<input type="checkbox"/>	<input checked="" type="checkbox"/>	%
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(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES **n/a** % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000914 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

INFO-TRACTS, L.L.C, PO BOX 65778, TUCSON, AZ 85728

RESPONDENT NAME: **INFO-TRACTS, L.L.C**
5000 EAST RIVER ROAD TUCSON, AZ
 ADDRESS: **85718**
 P.O. ADDRESS: **POB 65778 TUCSON, AZ 85728-5778**
 TELEPHONE NUMBER: **520.299.0573**
 FACSIMILE NUMBER: **520.299.0363**
 WEB SITE: **N/A**
 REPRESENTATIVE: **Margaret DiFrank**
 REPRESENTATIVE E-MAIL: **mdifrank@comcast.net**

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES **tracts** % OF TOTAL BID AMOUNT. (If Applicable)

☐ NET 10 DAYS ☒ NET 45 DAYS ☐ 1% 10 DAYS NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000893 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

WILLIAMS INVESTIGATIONS, 610 W. BROADWAY RD., STE 201, TEMPE, AZ 85282
INTELLIQUEST

RESPONDENT NAME: **James P. Williams**
 ADDRESS: **610 W. Broadway Rd., Ste 201 Tempe, AZ 85282-1275**
 P.O. ADDRESS:
 TELEPHONE NUMBER: **602-708-0494**
 FACSIMILE NUMBER: **480-921-3046**
 WEB SITE: **www.desertmecca.com**
 REPRESENTATIVE: **James P. Williams**
 REPRESENTATIVE E-MAIL: **iquet93@aol.com**

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES	
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES	
Are you bilingual; fluent in English & another language other than English?	YES	Russian Conversational Spanish

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000894 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

JOSEPH DANIEL AND MEYER, INC., 2000 NORTH 7TH STREET, PHOENIX, AZ 85006

RESPONDENT NAME: **Joseph Daniel & Meyer, Inc**
 ADDRESS: **2000 N 7th Street Phoenix, AZ 85006**
 P.O. ADDRESS:
 TELEPHONE NUMBER: **602-254-9908**
 FACSIMILE NUMBER: **602-254-9271**
 WEB SITE:
 REPRESENTATIVE: **Mary Margaret Kelly**
 REPRESENTATIVE E-MAIL: **MspyU@aol.com**

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000924 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

BENNY LUCERO, 1851 EAST CAMPO BELLO DRIVE, PHOENIX, AZ 85022

RESPONDENT NAME: Benny M Lucero
 ADDRESS: 1851 E Campobello Drive
 P.O. ADDRESS: Phoenix, AZ 85022
 TELEPHONE NUMBER: 602 765 7661
 FACSIMILE NUMBER:
 WEB SITE: -
 REPRESENTATIVE: Benny Lucero
 REPRESENTATIVE E MAIL: LBenny2009@yahoo.com

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input type="checkbox"/>	%
(Payment shall be made within 48 hours of utilizing the Purchasing Card)			
FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)			
<input checked="" type="checkbox"/> NET 30 DAYS	<input type="checkbox"/> 2% 10 DAYS NET 30 DAYS	<input type="checkbox"/> 5% 30 DAYS NET 31 DAYS	

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES	
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES	
Are you bilingual; fluent in English & another language other than English?	YES	Spanish

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000901-0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014.**

EXPIRED EFFECTIVE 08/01/2014

MCCLOSKEY MITIGATION, LLC, P.O. BOX 50601, PHOENIX, AZ 85076-0601

RESPONDENT NAME: **McCloskey Mitigation and Investigations, LLC**
 ADDRESS: **3605 East Rocky Slope Drive Phoenix, Arizona 85044**
 P.O. ADDRESS: **P.O. Box 50601 Phoenix, Arizona 85076-0601**
 TELEPHONE NUMBER: **602-488-1294**
 FACSIMILE NUMBER: **480-284-6273**
 WEB SITE:
 REPRESENTATIVE: **Michelle M. McCloskey**
 REPRESENTATIVE E-MAIL: **mmmccloskey@cox.net**

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	%
<small>(Payment shall be made within 48 hours of utilizing the Purchasing Card)</small>			
FUEL COMPRISES	% OF TOTAL BID AMOUNT. (If Applicable)		
<input checked="" type="checkbox"/> NET 30 DAYS <input type="checkbox"/> 2% 10 DAYS NET 30 DAYS <input type="checkbox"/> 5% 30 DAYS NET 31 DAYS			

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000898 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

OUTBACK ADJUSTING AND INVESTIGATIONS, 6619 N. SCOTTSDALE RD., SCOTTSDALE, AZ 85250

RESPONDENT NAME: **Leland Damner - Outback Adjusting And Investigative Services LLC**
 ADDRESS: **6619 N. Scottsdale Rd Scottsdale, AZ 85250**
 P.O. ADDRESS: **N/A**
 TELEPHONE NUMBER: **480-483-1001**
 FACSIMILE NUMBER: **480-452-0160**
 WEB SITE: **www.outbackinvestigations.com**
 REPRESENTATIVE: **Leland Damner**
 REPRESENTATIVE E-MAIL: **gotproof@cox.net**

YES	NO	REBATE
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WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:

<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:

<input type="checkbox"/>	<input checked="" type="checkbox"/>	% 0
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(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES **0** % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000907 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

PETROSINO INVESTIGATIONS LLC, 1917 W. WILSHIRE DR., PHOENIX, AZ 85009

RESPONDENT NAME: **Petrosino Investigations, LLC**
 ADDRESS: **1917 W Wilshire Dr Phoenix, AZ 85009**
 P.O. ADDRESS:
 TELEPHONE NUMBER: **602 909-2900**
 FACSIMILE NUMBER: **602 462-5077**
 WEB SITE:
 REPRESENTATIVE: **Joseph J Petrosino**
 REPRESENTATIVE E-MAIL: **Petrosino.investigates@gmail.com**

YES	NO	REBATE
-----	----	--------

WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	
-------------------------------------	--------------------------	--

WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	% 1
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(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☐ NET 10 DAYS ☐ NET 45 DAYS ☒ 1% 10 DAYS NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000897 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

PRIVATE EYE INVESTIGATIONS LLC, P.O. BOX 1322, SUN CITY, AZ 85372

RESPONDENT NAME: Private Eye Investigations, LLC
 ADDRESS: 9347 W. Quail Ave Peoria, AZ 85382
 P.O. ADDRESS: P.O. Box 1322 Sun City, AZ 85372-1322
 TELEPHONE NUMBER: 480-633-3396
 FACSIMILE NUMBER: 602-449-9577
 WEB SITE: ~~http://www.privateeyeinvestigations.com~~
 REPRESENTATIVE: Stephen Rosenthal
 REPRESENTATIVE E MAIL: srosenthal@privateeyeinvestigations.com

YES	NO	REBATE
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WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:

<input checked="" type="checkbox"/>	<input type="checkbox"/>
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WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:

<input type="checkbox"/>	<input checked="" type="checkbox"/>	%
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(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES ~~% OF TOTAL BID AMOUNT. (If Applicable)~~

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES	
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES	
Are you bilingual; fluent in English & another language other than English?	YES	Spanish

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000928-0

Certificates of Insurance Required

Contract Period: To cover the period ending July 31, 2014.

CANCELLED BY MARICOPA COUNTY EFFECTIVE 12/07/2011

RAPPLEYEA INVESTIGATIONS, LLC, 1743 E KATHLEEN RD, PHOENIX, AZ 85022

RESPONDENT NAME: Rappleyea Investigations, LLC
 ADDRESS: 1743 E. Kathleen Rd. Phoenix, AZ 85022
 P.O. ADDRESS:
 TELEPHONE NUMBER: 602-708-0301
 FACSIMILE NUMBER: 602-493-7660
 WEB SITE: -
 REPRESENTATIVE: L. Lee Rappleyea
 REPRESENTATIVE E MAIL: LRappleyea@cox.net

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES N/A % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000902 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014.**

EXPIRED EFFECTIVE 08/01/2014

SALINAS AND ASSOCIATES, 4920 WEST BASELINE ROAD, #C105, PMB #236 LAVEEN, AZ 85339
~~5130 WEST BASELINE ROAD, SUITE 117, PMB 236, LAVEEN, AZ 85339~~

RESPONDENT NAME: Stella A. Salinas
5130 W. Baseline Road, Suite 117, PMB 236
Laveen, AZ 85339
4920 W. Baseline Rd. #C105, PMB 236
Laveen, AZ 85339

ADDRESS: n/a

P.O. ADDRESS: n/a

TELEPHONE NUMBER: 602-245-0019

FACSIMILE NUMBER: 602-237-9916

WEB SITE: n/a

REPRESENTATIVE: Stella A. Salinas

REPRESENTATIVE E-MAIL: ssali@q.com ssalipi2@cox.net

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES **n/a** % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES	
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES	
Are you bilingual; fluent in English & another language other than English?	YES	Spanish

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000890 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

T & T INVESTIGATIONS, LLC PO BOX 8602, PHOENIX, AZ 85041

RESPONDENT NAME: **Tammy Hardy T & T Investigations, LLC**
 ADDRESS: **2601 N 16th street Phoenix, AZ 85006**
 P.O. ADDRESS: **PO Box 8602 Phoenix, AZ 85066**
 TELEPHONE NUMBER: **602-615-6627**
 FACSIMILE NUMBER: **602-916-1119**
 WEB SITE: **www.tinvestigations.com**
 REPRESENTATIVE: **Tammy Hardy**
 REPRESENTATIVE E-MAIL: **hardyt@q.com hardyt@cox.net**

	YES	NO	REBATE
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL OFFER REBATE (CASH OR CREDIT) FOR UTILIZING PROCUREMENT CARD:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	%

(Payment shall be made within 48 hours of utilizing the Purchasing Card)

FUEL COMPRISES % OF TOTAL BID AMOUNT. (If Applicable)

☒ NET 30 DAYS ☐ 2% 10 DAYS NET 30 DAYS ☐ 5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 9615001

Vendor Number: 2011000929 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.**

CRAIG AND ASSOCIATES LLC., POST OFFICE BOX 15132, PHOENIX, AZ 85060

COMPANY NAME:	<u>Craig and Associates LLC.</u>
DOING BUSINESS AS (DBA) NAME:	<u></u>
MAILING ADDRESS:	<u>Post Office Box 15132, Phoenix, AZ 85060</u>
REMIT TO ADDRESS:	<u>Craig and Associates LLC.</u>
	<u>Post Office Box 15132, Phoenix, AZ 85060</u>
TELEPHONE NUMBER:	<u>602-840-5879</u>
FACSIMILE NUMBER:	<u>602-840-2495</u>
WEB SITE:	<u></u>
REPRESENTATIVE NAME:	<u>Jon M. Craig</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>602-840-5879</u>
REPRESENTATIVE E-MAIL:	<u>joncraigpi@cox.net</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

PAYMENT TERMS:



NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	YES

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011003710 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.****VENDOR ADDED EFFECTIVE 08/08/13**

I SPY INVESTIGATIONS INC.,14175 W INDIAN SCHOOL DR B4-211, GOODYEAR, AZ 85395

COMPANY NAME:	<u>I Spy Investigations Inc.</u>
DOING BUSINESS AS (DBA) NAME:	
MAILING ADDRESS:	<u>14175 W Indian School Dr B4-211, Goodyear, AZ 85395</u>
REMIT TO ADDRESS:	<u>14175 W Indian School Dr B4-211, Goodyear, AZ 85395</u>
TELEPHONE NUMBER:	<u>623 535-7987</u>
FACSIMILE NUMBER:	<u>1 888 876-7185</u>
WEB SITE:	
REPRESENTATIVE NAME:	<u>Anthony Britnell</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>623 535-7987</u>
REPRESENTATIVE E-MAIL:	<u>anthony.britnell@gmail.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

PAYMENT TERMS:



NET 15 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number:	2011003703 0
Certificates of Insurance	Required
Contract Period:	To cover the period ending July 31, 2014 2017.

VENDOR ADDED EFFECTIVE 08/08/13

JON LANE dba ECI INVESTIGATIONS, 67 S. HIGLEY ROAD, SUITE 103-486, GILBERT, AZ 85296

COMPANY NAME:	<u>Jon Lane</u>
DOING BUSINESS AS (DBA) NAME:	<u>ECI Investigations</u>
MAILING ADDRESS:	<u>67 S. Higley Road, Suite 103-486, Gilbert, AZ 85296</u>
REMIT TO ADDRESS:	<u>67 S. Higley Road, Suite 103-486, Gilbert, AZ 85296</u>
TELEPHONE NUMBER:	<u>480-699-8277</u>
FACSIMILE NUMBER:	<u>480-699-8277</u>
WEB SITE:	<u>eciinvestigations.com</u>
REPRESENTATIVE NAME:	<u>Jon Lane</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>480-699-8277</u>
REPRESENTATIVE E-MAIL:	<u>jon_eci@cox.net</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

PAYMENT TERMS:

☒ NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number:	2011003700 0
Certificates of Insurance	Required
Contract Period:	To cover the period ending July 31, 2014 2017.

VENDOR ADDED EFFECTIVE 08/08/13

MICHAEL STOVALL dba M.D.S. INVESTIGATIONS LLC, 3102 E.CLARENDON AVE #111 PHOENIX AZ

COMPANY NAME:	<u>Michael Stovall</u>
DOING BUSINESS AS (DBA) NAME:	<u>M.D.S.Investigations,LLC</u>
MAILING ADDRESS:	<u>3102 E.Clarendon Ave #111 Phoenix Az</u>
REMIT TO ADDRESS:	<u>3102 E. Clarendon Ave #111 Phoenix Az</u>
TELEPHONE NUMBER:	<u>602 628-7367</u>
FACSIMILE NUMBER:	<u></u>
WEB SITE:	<u></u>
REPRESENTATIVE NAME:	<u>Michael Stovall</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>602 628 7367</u>
REPRESENTATIVE E-MAIL:	<u>mstovall61@gmail.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input type="checkbox"/>
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PAYMENT TERMS:



NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011003706 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.****VENDOR ADDED EFFECTIVE 08/08/13**

SUZANNE LANE dba INVESTIGATIVE SUPPORT SERVICES, 67 S. HIGLEY ROAD #103-486, GILBERT, AZ 85296

COMPANY NAME:	<u>Suzanne Lane</u>
DOING BUSINESS AS (DBA) NAME:	<u>Investigative Support Services</u>
MAILING ADDRESS:	<u>67 S. Higley Road #103-486, Gilbert, AZ 85296</u>
REMIT TO ADDRESS:	<u>67 S. Higley Road #103-486, Gilbert, AZ 85296</u>
TELEPHONE NUMBER:	<u>480-699-8277</u>
FACSIMILE NUMBER:	<u></u>
WEB SITE:	<u></u>
REPRESENTATIVE NAME:	<u>Suzanne Lane</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>480-699-8277</u>
REPRESENTATIVE E-MAIL:	<u>sue_iss@cox.net</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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PAYMENT TERMS:

☒ NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011003704 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2014 2017.****VENDOR ADDED EFFECTIVE 08/08/13**

LEE W COLE DBA: AEQUITAS INVESTIGATIONS, 2600 S. 7TH AVE., PHOENIX, AZ 85007

COMPANY NAME:	<u>Aequitas Investigations</u>
DOING BUSINESS AS (DBA) NAME:	<u>Lee William Cole</u>
MAILING ADDRESS:	<u>2600 S. 7th Ave., Phoenix, AZ 85007</u>
REMIT TO ADDRESS:	<u>2600 S. 7th Ave., Phoenix, AZ 85007</u>
TELEPHONE NUMBER:	<u>6022536538</u>
FACSIMILE NUMBER:	<u></u>
WEB SITE:	<u></u>
REPRESENTATIVE NAME:	<u>Lee Cole</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>6022536538</u>
REPRESENTATIVE E-MAIL:	<u>lee.aequitas@gmail.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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PAYMENT TERMS:



NET 45 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005417 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.****VENDOR ADDED EFFECTIVE 10/30/14**

LARRY L RIVES, DBA: AGENCY NW INVESTIGATIONS, 18521 E. QUEEN CREEK RD., SUITE #105-618, QUEEN CREEK, AZ 85142

COMPANY NAME:	<u>Larry L. Rives</u>
DOING BUSINESS AS (DBA) NAME:	<u>Agency NW Investigations</u>
MAILING ADDRESS:	<u>18521 E. Queen Creek Rd. Ste. 105-221</u> <u>Queen Creek, AZ 85142</u>
REMIT TO ADDRESS:	<u>18521 E. Queen Creek Rd. Ste. 105-221</u> <u>Queen Creek, AZ 85142</u>
TELEPHONE NUMBER:	<u>480-291-4716/ 830-496-1248</u>
FACSIMILE NUMBER:	<u>480-291-4716</u>
WEB SITE:	<u>Agency NW Investigations.com</u>
REPRESENTATIVE NAME:	<u>Larry L. Rives</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>480-291-4716</u>
REPRESENTATIVE E-MAIL:	<u>rives1630@gmail.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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PAYMENT TERMS:



5% 30 DAYS NET 31 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005312 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.****VENDOR ADDED EFFECTIVE 10/30/14**

WILLIAM TASH DBA: CACTUS INVESTIGATION, 8485 E. MCDONALD DR., SUITE #202, SCOTTSDALE, AZ 85250

COMPANY NAME:	<u>Cactus Investigation</u>
DOING BUSINESS AS (DBA) NAME:	
MAILING ADDRESS:	<u>8485 E. McDonald Dr. Ste. 202, Scottsdale, AZ 85250</u>
REMIT TO ADDRESS:	<u>8485 E. McDonald Dr. Ste. 202, Scottsdale, AZ 85250</u>
TELEPHONE NUMBER:	<u>602-740-4200</u>
FACSIMILE NUMBER:	<u>480-949-7723</u>
WEB SITE:	<u>www.cactusinvestigation.com</u>
REPRESENTATIVE NAME:	<u>William Tash</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>602-740-4200</u>
REPRESENTATIVE E-MAIL:	<u>info@cactusinvestigation.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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PAYMENT TERMS:

☒ NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005413 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.**

VENDOR ADDED EFFECTIVE 10/30/14

D. MICHAEL & ASSOCIATES, INC., P.O. BOX 25074, PHOENIX, AZ 85002

COMPANY NAME:	<u>D. Michael & Associates Inc.</u>
DOING BUSINESS AS (DBA) NAME:	<u></u>
MAILING ADDRESS:	<u>P.O. Box 25074, Phoenix, AZ 85002</u>
REMIT TO ADDRESS:	<u>P.O. Box 25074, Phoenix, AZ 85002</u>
TELEPHONE NUMBER:	<u>623.670.0726</u>
FACSIMILE NUMBER:	<u></u>
WEB SITE:	<u>http://www.dmapi.com</u>
REPRESENTATIVE NAME:	<u>Damian M Jarrett</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>623.670.0726</u>
REPRESENTATIVE E-MAIL:	<u>djarrett@dmapi.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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PAYMENT TERMS:



NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005432 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.****VENDOR ADDED EFFECTIVE 10/30/14**

GRAY EXECUTIVE SERVICE, INC., P.O. BOX 10535, GLENDALE, AZ 85318

COMPANY NAME:	<u>Gray Executive Service, Inc.</u>
DOING BUSINESS AS (DBA) NAME:	<u></u>
MAILING ADDRESS:	<u>P.O. Box 10535, Glendale, AZ 85318</u>
REMIT TO ADDRESS:	<u>P.O. Box 10535, Glendale, AZ 85318</u>
TELEPHONE NUMBER:	<u>623.693.0600</u>
FACSIMILE NUMBER:	<u>623.566-2416</u>
WEB SITE:	<u>www.protectionelite.com</u>
REPRESENTATIVE NAME:	<u>Larry Wakefield</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>623.693.0600</u>
REPRESENTATIVE E-MAIL:	<u>grayexecutiveservice@gmail.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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PAYMENT TERMS:



NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005410 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.****VENDOR ADDED EFFECTIVE 10/30/14**

LIEN & BOND INVESTIGATIONS, 9221 E. BASELINE RD., BLDG A109, SUITE # 222, MESA, AZ 85209

COMPANY NAME:	<u>Lien & Bond Investigative Services L.L.C.</u>
DOING BUSINESS AS (DBA) NAME:	<u></u>
MAILING ADDRESS:	<u>9221 E Baseline Rd., Bldg A109, Ste# 222, Mesa, AZ 85209</u>
REMIT TO ADDRESS:	<u>9221 E Baseline Rd., Bldg A109, Ste# 222, Mesa, AZ 85209</u>
TELEPHONE NUMBER:	<u>480-251-7373</u>
FACSIMILE NUMBER:	<u>480-304-9116</u>
WEB SITE:	<u>www.ArizonaPis.com</u>
REPRESENTATIVE NAME:	<u>Kelly Townsend</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>480-251-7373</u>
REPRESENTATIVE E-MAIL:	<u>Tracker@ArizonaPis.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
PAYMENT TERMS:			
<input checked="" type="checkbox"/> NET 30 DAYS			

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES	
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES	
Are you bilingual; fluent in English & another language other than English?	YES	Spanish

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005436 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.**

VENDOR ADDED EFFECTIVE 10/30/14

TIM YOUNG DBA: PATHFINDER INVESTIGATIONS, 12038 W. VIA DEL SOL CT., SUN CITY, AZ 85373

COMPANY NAME:	<u>Pathfinder Investigations</u>
DOING BUSINESS AS (DBA) NAME:	<u>Pathfinder Investigations</u>
MAILING ADDRESS:	<u>12038 W Via Del Sol Ct., Sun City, AZ 85373</u>
REMIT TO ADDRESS:	<u>12038 W Via Del Sol Ct., Sun City, AZ 85373</u>
TELEPHONE NUMBER:	<u>(602) 380-2102</u>
FACSIMILE NUMBER:	<u>(866) 375-6124</u>
WEB SITE:	<u>timyoungprivateinvestigator.com</u>
REPRESENTATIVE NAME:	<u>Tim Young</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>(602) 380-2102</u>
REPRESENTATIVE E-MAIL:	<u>pathfinderinvestigations@cox.net</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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PAYMENT TERMS:

☒ NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005409 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.**

VENDOR ADDED EFFECTIVE 10/30/14

RICHARD B LUEHRING DBA: SOUTHWEST GROUP, 4848 E. CACTUS RD., SUITE 505-546, SCOTTSDALE, AZ 85254

COMPANY NAME:	<u>Southwest Group</u>
DOING BUSINESS AS (DBA) NAME:	
MAILING ADDRESS:	<u>4848 E Cactus Road ,Suite 505-546, Scottsdale, AZ 85254</u>
REMIT TO ADDRESS:	<u>4848 E Cactus Road , Suite 505-546, Scottsdale, AZ 85254</u>
TELEPHONE NUMBER:	<u>602-920-0133</u>
FACSIMILE NUMBER:	<u>480-361-1421</u>
WEB SITE:	
REPRESENTATIVE NAME:	<u>Richard Luehring</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>602-920-0133</u>
REPRESENTATIVE E-MAIL:	<u>richard.luehring@swgroupinvestigations.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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PAYMENT TERMS:



NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005402 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.****VENDOR ADDED EFFECTIVE 10/30/14**

WE DUE PROCESS, LLC, PO BOX 74172, PHOENIX, AZ 85087

COMPANY NAME:	<u>We Due Process, LLC</u>
DOING BUSINESS AS (DBA) NAME:	<u>We Due Process</u>
MAILING ADDRESS:	<u>PO BOX 74172, Phoenix, AZ 85087</u>
REMIT TO ADDRESS:	<u>PO BOX 74172, Phoenix, AZ 85087</u>
TELEPHONE NUMBER:	<u>623-432-6258</u>
FACSIMILE NUMBER:	<u>623-242-1102</u>
WEB SITE:	<u>www.wedueprocess.com</u>
REPRESENTATIVE NAME:	<u>Philip Alkhoury</u>
REPRESENTATIVE TELEPHONE NUMBER:	<u>623-432-6258</u>
REPRESENTATIVE E-MAIL:	<u>phil@wedueprocess.com</u>

	<u>YES</u>	<u>NO</u>	<u>REBATE</u>
WILL ALLOW OTHER GOVERNMENTAL ENTITIES TO PURCHASE FROM THIS CONTRACT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

WILL ACCEPT PROCUREMENT CARD FOR PAYMENT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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PAYMENT TERMS:

☒ NET 30 DAYS

Payment according to Section 2.1.43.3 (other authorized tasks) \$35.00/hour	YES
Payment according to Section 2.1.43.3 (review of discovery) \$25.00/hour	YES
Are you bilingual; fluent in English & another language other than English?	NO

PRICING SHEET: NIGP CODE: 96147

Vendor Number: 2011005404 0

Certificates of Insurance Required

Contract Period: To cover the period ending **July 31, 2017.**

VENDOR ADDED EFFECTIVE 10/30/14